PLACE OF DEATH  County of June	Arizona Territorial Board of Health
County of Yuma	BUREAU OF VITAL STATISTICS 280
District of	ORIGINAL CERTIFICATE OF DEATH
	Ter. Index No.
Town of	
	County Registered No. 468
(It death occurs away from USUAL (No. RESIDENCE, give facts called for under "Special information.")  FULL NAME	ward.) (If death occurred in a Hospital or Institution, give its NAME instead of street and number.)
	JLARS MEDICAL CERTIFICATE OF DEATH
LENGTH OF RESIDENCE	DATE OF DEATH March 8 1911
!! At Place of Death / was ->	(month) (day) (year)
In Arizona / yrs 3	mos. I hereby certify, That I attended deceased from
	highese March 6 191/ to March 8 1911
Mexican	that I last saw have on work 7 19/1
DATE OF BIRTH TO	and that death occurred on the date stated above at 1:00 PM
(gronth) (day)	(year) The DISEASE or INJURY causing DEATH was as follows:
(month) (day)	- Sacto Ententis
years years mont	s 16 days
SINGLE, MARRIED, WIDOWED, OR DIVORCED	Wherecontracted frum Duration 2 week
WIDOWED, OR DIVORCED	Contributing cause (if any) Measer
BIRTHPLACE DATE	old
(State or foreign country)	Where contracted June Duration 3 Wals
(State or foreign country) Occupation	(Signed) Ketcherick M.D.
NAME OF T	3/8/19/1 Address y
BIRTHPLACE OF	SPECIAL INFORMATION only for Hospitals, Institutions, Transients, or Recent Residents.
(State or foreign country) Mexico	Former or How long at
MAIDEN NAME	Usual residence
of MOTHER Lupa Couce	Place of burial or removal  Date of burial or removal
BIRTHPLACE OF MOTHER (State or foreign county)  Mey is	M.C. Carenday March 8-19/1
(State of Foreign county)	Undertaker Address
THE ABOVE STATED PERSONAL PARTICULARS ARE BEST OF MY TOWLEDGE AND BELIEF.	TRUE TO THE TOTAL CONTROL OF THE CON
Informant) Jakelehers	de Filed Kar. 8 1011 Harri ap Johns